

Best Available Copy

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-413)							SERIAL NO.	FILING DATE
							APPLICANT'S	
CLAIMS								
	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT		NO.	DEF.
	NO.	DEF.	NO.	DEF.	NO.	DEF.		
1							61	
2							62	
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TOTAL NO.	5						TOTAL NO.	
TOTAL DEF.	24						TOTAL DEF.	